## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

APPLICANTS

FILING DATE

CLAIMS

|               | AS F   |  |          | TER<br>ENDMENT                                   |  | AFTER 2 MAMENDMENT |  |
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| 50<br>TOTAL   |  |  |          |  |  |                    |  |
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| TOTAL<br>DEP. | 3/1  | <b>+</b>   |          | <b>4</b>   |  | 4                  |  |
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|                 | AS FILED |            |             | TER<br>ndment | AFTER 2 MAMENDMENT |  |
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| TOTAL<br>CLAIMS |          | S. DEPARTM |             |               |                    |  |

PTO - 1360 (REV. 11/04)

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